



SDAH-24-1

Application for an
Advisory Meeting for a
Subdivision or PUD

Status: Active

Submitted On: 2/8/2024

Primary Location


3801 West Deputy Pike Road
Madison, IN 47250

Owner


ALH Farms LLC

Applicant

 Alexandra Hammock

 812-599-7406

alexandrahammock@gmail.com

 1035 Filmore

PO Box 1065

Madison, IN 47250

General Information

Are you the property owner? *

No

Property Owner Information

Property Owner Name*

Tony Hammock Tim Boldery

Mailing Street Address*

PO Box 1065

City*

Madison

State*

IN

Zip Code*

47250

Permit Information

Address or Legal Description of Property*

010-00754-01 W 1/2 NW 19-4-10 49.639 AC 10-33-1 2000+ N BORCHERDING
RD

Parcel I.D. 

39-08-19-000-005.001-006

Zoning Classification*

Approximate Cost of Work to be Done

Residential Agriculture RA

Surveyor or Engineer Information

Name*

Mailing Street Address

Pettitt & Associates

11 Medical Plaza

City

State

Hanover

IN

Zip Code

Phone Number

47243

(812) 866-2562

Email

Acknowledgement

Certified letters MUST be mailed to adjoining property owners (includes owners of real estate at corners, accross streets, alleys or easements as well as others who may share a common boundary) at least ten (10) days prior to the meeting. The Planning Office can assist you in obtaining this information. Proof of the Certified Mail receipts and the corresponding returned green cards shall be given to the Planning Office at least one (1) working day prior to the scheduled meeting. The Board will not review the application unless these are received.

I certify that the information provided in this application is true and accurate to the best of my ability and I understand and agree to the Certified mail stipulations.

Digital Signature*



Alexandra Hammock

Feb 8, 2024